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FACSIMILE INFORMATION SHEET

Name of Individual: Examiner Colby M. Hansen

Company: USPTO

City and State: Alexandria, VA

Facsimile Number: 703-872-9306

From: John W. McIlvaine

Total Number of Pages: 16 (including Information Sheet)

Date Transmitted: May 27, 2005

Client No.: 1692 File No.: 011111

Message:

Dear Ex. Colby,
Please find attached, for your review, the following papers re U.S. Appln.
Serial No. 09/928,566:

- Amendment Transmittal Letter (1p in trip.)
- Petition for Extension of Time (1 p. in trip.); and
- Amendment After Final (9 pp.)

Please contact me directly with any questions you may have.

Regards,

John W. McIlvaine

If you do not receive all pages, please call back as soon as possible. The number is (412) 471-8815.

(W0191268.1)

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Attorney Docket No. 1692-011111**AMENDMENT TRANSMITTAL LETTER**

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Appln. No.: 09/928,566 Filing Date: August 13, 2001

Examiner: Yukihiko MATSUKAWA Art Unit: 3682

Invention: **DIVIDING HEAD USING MULTIPLE LEAD TYPE WORM**

Transmitted herewith is a Response and Petition for Extension of Time in the above-identified application.

- ☐ Small Entity Status is/has been asserted for this application under 37 CFR 1.27.
☐ A verified statement to establish small entity status under 37 CFR 1.27 is enclosed.
☒ No additional fee is required.
☐ The fee has been calculated as shown below:

	No of Claims After Amendment	Highest No. Previously Paid For	Present Entity Extra	Small Entity Rate	Non-Small Rate	Charge
Total	<u>3</u>	<u>20</u>	<u>0</u>	x \$ 25.00	x \$ 50.00	\$ <u>0</u>
Indep.	<u>1</u>	<u>3</u>	<u>0</u>	x \$100.00	x \$200.00	\$ <u>0</u>
First Presentation of Multiple Dependent Claim/s				\$180.00	+ \$360.00	\$ <u>0</u>
TOTAL ADDITIONAL FEE						\$ <u>0</u>

- ☐ A check in the amount of \$ is enclosed to cover the filing fee.
☐ A check in the amount of \$ is enclosed for a month Petition for Extension of Time.
☒ The Commissioner is hereby authorized to charge payment of **\$120.00** for a one-month Petition for Extension of Time associated with this communication to Deposit Account No. 23-0650. Please refund any overpayment to Deposit Account No. 23-0650. An original and two copies of this sheet are enclosed.
☒ Any additional filing fees required under 37 CFR 1.16.
☒ Any patent application processing fees under 37 CFR 1.17.

May 27, 2005
 Date

By [Signature]
 John W. McIlvaine
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 Attorney for Applicant
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CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office (Fax No. 703-872-9306) on the date shown below.

Pauline J. Moyles

(Typed Name of Person Signing Certification)

Signature

[Signature]

05/27/2005
 Date

(W0191258.1)

Attorney Docket No. 1692-011111**AMENDMENT TRANSMITTAL LETTER**

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 P.O. Box 1450
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Appln. No.: 09/928,566 Filing Date: August 13, 2001

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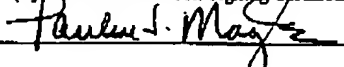
By 
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